



February 24, 2022

**Public Health Committee & Committee on Children**

**Re: Public Hearing on: H.B 5001 An Act Concerning Children's Mental Health and S.B. 2 An Act Expanding Preschool and Mental and Behavioral Services for Children**

Dear Senator Daughtery Abrams, Representative Steinberg, Senator Anwar, Representative Linehan, Senator Hwang, Senator Somers, Representative Petit, Senator Kelly, Representative Dauphinais and members of the Public Health Committee and Committee on Children.

Thank you for the opportunity to submit written testimony on H.B 5001 An Act Concerning Children's Mental Health and S.B. 2 An Act Expanding Preschool and Mental and Behavioral Services for Children. My name is Tina Banas and I am a Licensed Clinical Social Worker and the Director of Benchmark Infant & Toddler Services. Benchmark has been a contracted provider for CT Birth to Three since 2012 and currently serves children residing in 41 towns within the State.

*As early experiences shape the architecture of the developing brain, they also lay the foundations of sound mental health. Disruptions to this developmental process can impair a child's capacities for learning and relating to others — with lifelong implications. By improving children's environments of relationships and experiences early in life, society can address many costly problems, including incarceration, homelessness, and the failure to complete high school.*

*-- Center for the Developing Child, Harvard University*

Birth to Three is a federally mandated program, coordinated at the state level, to ensure that appropriate early intervention services are made available to families and children (from birth up to age three) who are eligible for services based on developmental delays and/or disabilities as outlined in the Individuals with Disabilities Education Act (IDEA). The mission of the CT Birth to Three System is to strengthen the capacity of families and caregivers to meet the developmental and health-related needs of their infants and toddlers. In determining eligibility and need, assessments are provided assessing five areas: cognitive development, physical development, communication development, social or emotional development, and adaptive development. Additionally, children may qualify based on a diagnosed physical or mental condition that has a high probability of resulting in developmental delay.

I am thankful to the bipartisan coalition of legislators and leaders who have identified the children's mental health crisis as the top priority for the General Assembly this year. This crisis is not new, and many of the changes proposed in this bill are long overdue. The pandemic has exacerbated problems and resulted in higher mental health needs of both children and adult caregivers.

Over the last few years, an increasing number of referrals are coming in to the CT Birth to Three System with social and emotional concerns. In addition, there has been an increase in children diagnosed with

Autism and Spectrum Disorders. Currently, Benchmark is serving close to 800 children and we are considered one of the larger agencies in the CT Birth to Three System. In the last 32 months, The CT Birth to Three System has received 26,275 referrals; 7,446 of these referrals included a concern regarding social-emotional development. This represents 28% of referrals over this time frame. Additionally, in looking at the data from referrals received to date for FY 22, 33% have indicated a social-emotional concern and the trend is anticipated to increase. Certainly the rise in social emotional concerns for children can be tied to pandemic related impacts, as well as other stressors that are impacting CT families such as unemployment, housing instability, lack of community resources to address medical and mental health needs, etc. We know that the effects of the pandemic have been far reaching and young children are not exempt from this fallout.

As a Birth to Three Provider Agency, our program supports children and families by offering services within natural environments that are targeted to build capacity of families and strengthen the parent-child bond. Home based services are provided, offering professional intervention from licensed clinicians (Physical Therapists, Occupational Therapists, Speech & Language Pathologists, Developmental Therapists, Behavioral Analysts and Social Workers). Board Certified Behavioral Analysts and Licensed Social Workers are a key disciplines employed to assist families with social and emotional development and behavioral health needs, as well as to conduct Autism screenings. All Early Intervention Providers mentor and coach families and work toward building parent skills to best meet child needs. In addition, Service Coordinators assist parents with case management support and linkages to community services outside of Birth to Three, including assistance with transition to the public school system. Working with early childhood is foundational and has been demonstrated as an essential and effective way to optimize child outcomes and mitigate negative trajectories.

With the rise in child needs, resources to support these needs has become incredibly stretched. Birth to Three programs are experiencing staffing shortages across the state. The cost of doing business has increased (rent, staff mileage, increased training, need for competitive salaries) and yet the program funding has remained flat with no increase. This is most concerning as lack of funding will impact the quality and quantity of services to vulnerable children in CT. Knowing the importance of early intervention, this is a critical area that needs enhanced focus and funding to ensure increased outcomes in child development, child safety, and mental health.

To be clear: there is no way to address the children's mental health crisis without addressing the chronic underfunding of existing community services in CT. The legislature's commitment to children's mental health must extend to the appropriations process and must increase funding for programs serving vulnerable children.

Please see the two additional documents I have attached: one which provides information on how flat funding has impacted Birth to Three Services across the state and the negative impact for children; and the other which speaks to the need for investment in early childhood services to reduce deficits and strengthen the economy.

Thank you for the opportunity to submit this written testimony, for your time in reading this information, and for your consideration of these important issues.

Best regards,

**Tina Banas, LCSW**  
Program Director

## Benchmark Infant & Toddler Program